

ALLINA HOME & COMMUNITY SERVICES

Home oxygen &
medical equipment

Customer information guide



ALLINA HOME &
COMMUNITY SERVICES

Allina Hospitals & Clinics

Our mission

We serve our communities by providing exceptional care, as we prevent illness, restore health and provide comfort to all who entrust us with their care.

Our vision

We will:

- Put the patient first
- Make a difference in people's lives by providing exceptional care and service
- Create a healing environment where passionate people thrive and excel
- Lead collaborative efforts that solve our community's health care challenges

Our values

INTEGRITY

We match our actions with words.

RESPECT

We treat everyone with honor, dignity and courtesy.

TRUST

We act in the best interests of our patients, physicians, communities and one another.

COMPASSION

We create a caring environment for our patients and one another.

STEWARDSHIP

We recognize that health care is essential to the common good and commit ourselves to using our resources wisely.

Welcome

Thank you for choosing us to fulfill your home medical equipment needs.

Home oxygen & medical equipment, a division of Allina Home & Community Services, is proud to be accredited by the Community Health Accreditation Program (CHAP). This accreditation shows that we are in compliance with the CHAP Standards of Excellence and the quality standards set forth by the Centers for Medicare & Medicaid Services.

This guide provides you with information about the equipment and services we provide.

Ordering information	4
Billing and insurance information	6
Your equipment	8
Other services	9
In case of an emergency	10
Concerns and complaints	11
Medicare supplier standards	12
Minnesota Patients' Bill of Rights	15
Your privacy rights	19
Showroom locations	Back cover

Allina Home & Community Services
Home Oxygen & Medical Equipment
651-628-4800 (Twin Cities)
1-800-737-4473
allina.com/oxygen

Ordering information

Contact us

You can reach us for all your needs by calling our main number:

651-628-4800 (Twin Cities) or

1-800-737-4473 (toll free)

You can also visit one of our showroom locations which are listed on the back cover of this guide.

Placing an order

To order additional supplies or equipment, call 651-628-4800. Our staff is available Monday through Friday, from 7 a.m. to 7 p.m. and Saturday and Sunday from 8 a.m. to 4 p.m. On-call service is available 24 hours a day, 7 days a week for emergency needs.

We suggest you keep at least a week supply on hand at all times. For ease when placing your order, have your delivery slip available, as it includes your account number and the product information from your previous order.

Shipping and delivery of supplies and equipment

We may deliver your supplies and equipment with our own vehicles and staff, or we may ship your order using a delivery service.

When you call to order routine supplies, please allow two or three business days for delivery. For urgent needs, we can deliver the same day via our delivery trucks or for a fee by local courier. You or a representative will need to be at home to sign for the delivery.

For oxygen deliveries, we have established routes on specific days. You can help us deliver efficiently by planning your oxygen deliveries for the day our vehicles are in your area. Of course, if you run low on oxygen or other supplies, we will gladly work with you to take care of your needs.

Warranty information

If your equipment has a warranty offered by the manufacturer, we will provide you with a copy. Any warranties provided are honored by the manufacturer of the equipment. We will assist you in resolving any concerns.

Service and repairs

If you have problems with equipment you are renting from us, call us for troubleshooting assistance or to exchange the equipment.

We also offer repair service for equipment that you own. Please call our main number to schedule the repair. Upon request, we can provide "loaner" equipment while your equipment is being repaired. We may submit a claim to your insurance company if you have coverage for the cost of repairs.

Return policy

Certain purchased items may be returned for credit, if approved. The following criteria must be met for a return to be approved:

- You have a receipt or proof of delivery slip
- The item is returned within 10 business days of delivery, and
- The item is in the original packaging, unopened, or if opened, in re-saleable condition.

The following items may not be returned:

- Personal care equipment and supplies (products that come in contact with skin, such as a CPAP mask or bathroom aids)
- Food products
- Opened supplies
- Special orders or non-stock items
- Partial cases of items that are sold by the case

If your return is not approved, the item will be returned to you.

For any returns, we reserve the right to charge a restocking fee of \$20 or 20 percent, whichever is greater.

Billing and insurance information

Contact us

If you have specific billing or insurance questions, call 651-628-4800 or 1-800-737-4473 and request to speak with the billing department.

Equipment rental versus purchase

To understand your billing, first you must know whether you are renting your equipment or have purchased it. Rental items appear on your delivery ticket with a product code that starts with "RNT." In general, we rent equipment that requires regular servicing by a skilled technician and sell personal care equipment and supplies.

You may have an option to purchase certain rental items, but we do not operate like a rent-to-own company. If you are interested in purchasing your equipment, please contact us and we will work with you and your insurance company.

For rental items, billing occurs on a month-to-month basis. The equipment rental agreement is between you and Allina Home Oxygen & Medical Equipment. If your insurance covers the rental item, we will bill your insurance for you; however, the rental agreement remains with you, not the insurance company.

Your insurance

We will bill your insurance based on the information we receive at the time of your order. Please notify us immediately of any changes to your insurance.

We encourage you to contact your insurance company for a full understanding of your home medical equipment benefits and coverage criteria for specific items.

Changes in insurance plans may have effects on renting equipment. If you are considering changing insurance, we suggest you ask the future insurance company about coverage for the rental equipment. In some instances, the rental period may change or start over when changing insurance plans.

Your invoice and payment options

An invoice will be mailed to you for your portion of charges, such as co-payments, deductibles and items not covered by insurance. This payment is due upon receipt.

You will be responsible for all outstanding charges if:

- Your insurance company denies payment
- Your physician does not complete documentation to support medical necessity as defined by your insurance
- Your insurance company does not pay us within 60 days of our billing date
- We do not have a contract with your insurance company
- Your insurance coverage terminates and we are not notified of new insurance

Payment options include:

- Check or money order
- Major credit or debit card (by phone or mail)
- MedCredit Financial Services (applications available)

For Medicare customers:

Home oxygen & medical equipment accepts assignment of most Medicare claims. Medicare pays 80 percent of charges, and you are responsible for 20 percent co-payment and deductibles. If Medicare denies the claim, we will bill you. In some instances, claims will be billed "non-assigned," which means we will bill the retail amount directly to you, with payment due upon receipt. We will process the claim on your behalf, and Medicare will reimburse you for the allowable amount.

Medicare Part B only covers medical equipment or oxygen for use in your home. A skilled nursing home can't qualify as your "home." During a stay in a skilled nursing home, you will be billed directly for medical equipment that we provide.

If you have questions about your Medicare coverage, please contact Medicare at 1-800-MEDICARE (1-800-633-4227).

Your equipment

You will be instructed on safe and proper use of your home medical equipment by our staff. If you have questions after the initial delivery, you may call customer service at any time.

We will also provide written instructions about your specific equipment.

Your responsibilities for using the equipment are to:

- Follow the instructions given by your physician and delivery technician for use of your equipment
- Store equipment safely as directed by the technician
- Keep your equipment and accessories clean. Follow the cleaning instructions and schedule provided to you.

Inform us of any new instructions or prescription changes you have received from your doctor about the use of your equipment.

Rental equipment should be returned in good working order and in the same condition as when delivered, with some ordinary wear expected. If the equipment is damaged or not in good working order, the cost of the repairs will be your responsibility. If equipment is lost or damaged beyond repair, you will be charged for replacement at the current retail rate.

Call us if you need help with moving equipment to a different room in your home. Moving heavy or dangerous items on your own could cause harm to you and damage the equipment.

Other services

Home medical equipment

We rent and sell more than 1,500 different products, including:

- Oxygen equipment such as oxygen concentrators, high pressure cylinders and liquid oxygen
- Respiratory products such as apnea monitor, CPAP, BiPAP, nebulizer, suction unit and ventilator
- Mobility equipment including manual and power wheelchairs, scooters and seating
- Hospital beds, specialty beds and overlays
- Walking aids such as walkers, canes and crutches
- Bathroom aids such as commodes, bath benches and grab bars
- For additional information, access our Web site at allina.com/oxygen

Other health and community resources

We recognize that your needs for health and quality of life may extend beyond home medical equipment or oxygen. We can help connect you with other services of Allina or within the community.

Call the Allina Care Navigation Help Desk at 651-635-9173 or 1-800-261-0879 for more information on any of the following:

- Home care
- Hospice
- Palliative care
- Advance care planning
- Interpreter services
- Caregiving services
- Financial assistance

Other community resource contacts:

- Call 211 for referral to a variety of human services agencies.
- Call 1-800-333-2433 for the Minnesota Senior Linkage line
- Access the Web site **MinnesotaHelp.info** for online access to statewide community resources.

In case of an emergency

We have equipment delivery staff on call 24 hours a day, 365 days a year. We are here to meet your emergency needs even outside of our usual business hours. Please call our main number for after-hours needs, and our answering service will forward your call. If your situation is emergent or life threatening, please call 911.

In the event of prolonged, widespread electrical outages and community-wide disasters, Allina Home & Community Services will attempt to utilize public service announcements on local radio stations. Please tune in to these local stations:

Twin Cities	WCCO AM 830
Buffalo	KRWC AM 1360
Cambridge	WCCO AM 830
Hutchinson	KDUZ AM 1260
New Ulm	KNUJ AM 860
Owatonna	KOWZ AM 1170

During natural disasters or other emergencies, Home oxygen & medical equipment will prioritize deliveries according to clinical need. Ventilator and oxygen clients will receive priority response.

Are you prepared?

Although we will do our very best to meet your emergency needs, we ask that you have a plan in place should disaster strike and we are unable to meet your needs in a timely manner.

- To avoid being caught short of needed oxygen, medication or supplies, please order several days in advance.
- Although we provide back-up batteries and equipment for such life support items as oxygen and ventilators, we do not provide electrical generators. Please consider this for your own personal rental or purchase.
- During a prolonged power outage, consider moving to a friend or relative who has electrical power or accessing your local hospital's emergency room.

Concerns and complaints

Contact us directly

If you have any concerns or complaints about your service, equipment or bill, please contact us so we can resolve your concern. Your situation will be investigated and action taken either at the time of your call or when a manager is available.

Please call us at 651-628-4800 or 1-800-737-4473

Or, you may write to us at the following address:

Allina Home & Community Services
Home oxygen & medical equipment
Attention: Customer Service Manager
1055 Westgate Drive, Suite 100
St. Paul, MN 55114

Other ways to file a complaint

We encourage you to contact us directly to resolve your concerns; however, you also have the option of filing a complaint with an external agency.

One external agency that you may contact with concerns is the organization that accredits Home oxygen & medical equipment, a division of Allina Home & Community Services.

Community Health Accreditation Program (CHAP)
1300 19th Street, Suite 150
Washington, DC 20036
www.chapinc.org
202-862-3413

You may also direct concerns to the Minnesota Attorney General's Office by calling 651-296-3353 or 1-800-657-3787 (toll free).

Medicare supplier standards

Companies that supply durable medical equipment, prosthetics, orthotics or supplies (DMEPOS) to Medicare beneficiaries must comply with these Supplier Standards in order to bill Medicare. This is an abbreviated version of the Standards. The complete standards are listed in the Code of Federal Regulations (42 CFR § 424.57 available at www.gpoaccess.gov) and are effective as of Sept. 9, 2010.

1. A supplier must be in compliance with all applicable Federal and State licensure and regulatory requirements and cannot contract with an individual or entity to provide licensed services.
2. A supplier must provide complete and accurate information on the DMEPOS supplier application. Any changes to this information must be reported to the National Supplier Clearinghouse within 30 days.
3. An authorized individual (one whose signature is binding) must sign the application for billing privileges.
4. A supplier must fill orders from its own inventory, or must contract with other companies for the purchase of items necessary to fill the order. A supplier may not contract with any entity that is currently excluded from the Medicare program, any State health care programs, or from any other Federal procurement or non-procurement programs.
5. A supplier must advise beneficiaries that they may rent or purchase inexpensive or routinely purchased durable medical equipment and of the purchase option for capped rental equipment.
6. A supplier must notify beneficiaries of warranty coverage and honor all warranties under applicable State law and repair or replace free of charge Medicare covered items that are under warranty.
7. A supplier must maintain a physical facility on an appropriate site. This standard requires that the location is accessible to the public and staffed during posted hours of business. The location must be at least 200 square feet and contain space for storing records.
8. A supplier must permit CMS, or its agents, to conduct on-site inspections to ascertain the supplier's compliance with these standards. The supplier location must be accessible to beneficiaries during reasonable business hours and must maintain a visible sign and posted hours of operation.
9. A supplier must maintain a primary business telephone listed under the name of the business in a local directory or a toll free number available through directory assistance. The exclusive use of a beeper, answering machine, answering service or cell phone during posted business hours is prohibited.
10. A supplier must have comprehensive liability insurance in the amount of at least \$300,000 that covers both the supplier's place of business and all customers and employees of the supplier. If the supplier manufactures its own items, this insurance must also cover product liability and completed operations.
11. A supplier must agree not to initiate telephone contact with beneficiaries, with a few exceptions allowed. This standard prohibits suppliers from contacting a Medicare beneficiary based on a physician's oral order unless an exception applies.
12. A supplier is responsible for delivery and must instruct beneficiaries on use of Medicare covered items and maintain proof of delivery.
13. A supplier must answer questions and respond to complaints of beneficiaries and maintain documentation of such contacts.
14. A supplier must maintain and replace at no charge or repair directly, or through a service contract with another company, Medicare-covered items it has rented to beneficiaries.
15. A supplier must accept returns of substandard (less than full quality for the particular item) or unsuitable items (inappropriate for the beneficiary at the time it was fitted and rented or sold) from beneficiaries.
16. A supplier must disclose these supplier standards to each beneficiary to whom it supplies a Medicare-covered item.
17. A supplier must disclose to the government any person having ownership, financial or control interest in the supplier.
18. A supplier must not convey or reassign a supplier number; i.e., the supplier may not sell or allow another entity to use its Medicare billing number.
19. A supplier must have a complaint resolution protocol established to address beneficiary complaints that relate to these standards. A record of these complaints must be maintained at the physical facility.

Medicare supplier standards, *continued ...*

20. Complaint records must include: the name, address, telephone number and health insurance claim number of the beneficiary, a summary of the complaint and any actions taken to resolve it.
21. A supplier must agree to furnish CMS any information required by the Medicare statute and implementing regulations.
22. All suppliers must be accredited by a CMS-approved accreditation organization in order to receive and retain a supplier billing number. The accreditation must indicate the specific products and services, for which the supplier is accredited in order for the supplier to receive payment of those specific products and services (except for certain exempt pharmaceuticals). Implementation Date – Oct. 1, 2009
23. All suppliers must notify their accreditation organization when a new DMEPOS location is opened.
24. All supplier locations, whether owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare.
25. All suppliers must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation.
26. Must meet the surety bond requirements specified in 42 CFR § 424.57(c). Implementation date- May 4, 2009
27. A supplier must obtain oxygen from a state- licensed oxygen supplier.
28. A supplier must maintain ordering and referring documentation consistent with provisions found in 42 CFR § 424.516(f).
29. DMEPOS suppliers are prohibited from sharing a practice location with certain other Medicare providers and suppliers.
30. DMEPOS suppliers must remain open to the public for a minimum of 30 hours per week with certain exceptions.

Minnesota Patients' Bill of Rights

Allina Home & Community Services' home oxygen & medical equipment division follows the Minnesota Home Care Bill of Rights. This bill reads as follows:

Statement of Rights

1. The right to receive written information about rights in advance of receiving care during the initial evaluation visit before initiation of treatment, including what to do if rights are violated.
2. The right to receive care and services according to a suitable and up-to-date plan, and subject to accepted medical or nursing standards, to take an active part creating and changing the plan and evaluating care and services.
3. The right to be told in advance of receiving care about the services that will be provided, the disciplines that will furnish care, the frequency of visits proposed to be furnished, other choices that are available, and the consequences of these choices, including the consequences of refusing these services.
4. The right to be told in advance of any change in the plan of care and to take an active part in any changes.
5. The right to refuse services and treatment.
6. The right to know, in advance, any limits to the services available from a provider, and the provider's grounds for termination of services.
7. The right to know in advance of receiving care whether the services are covered by health insurance, medical assistance, or other health programs, the charges for services that will not be covered by Medicare, and the charges that the individual may have to pay.
8. The right to know what the charges are for services, no matter who will be paying the bill.
9. The right to know that there may be other services available in the community, including other home care services and providers, and to know where to go for information about these services.
10. The right to choose freely among available providers and to change providers after services have begun, within the limits of health insurance, medical assistance, or other health programs.

Minnesota Patients' Bill of Rights, *continued ...*

11. The right to have personal, financial, and medical information kept private, and to be advised of the providers' policies and procedures regarding disclosure of such information.
12. The right to be allowed access to records and written information from records in accordance with section 144.335.
13. The right to be served by people who are properly trained and competent to perform their duties.
14. The right to be treated with courtesy and respect, and to have the patient's property treated with respect.
15. The right to be free from physical and verbal abuse.
16. The right to reasonable, advance notice of changes in services or charges, including at least 10 days advance notice of the termination of a service by a provider, except in cases where:
 - a. the recipient of services engages in conduct that alters the conditions of employment as specified in the employment contract between home care provider and the individual providing home care services, or creates an abusive or unsafe work environment for the individual providing home care services; or
 - b. an emergency for the informal caregiver or a significant change in the recipient's condition has resulted in service needs that exceed the current service provider agreement and that cannot be safely met by the home care provider.
17. The right to a coordinated transfer when there will be a change in provider of services.
18. The right to voice grievances regarding treatment of care that is, or fails to be, furnished, or regarding the lack of courtesy or respect to the patient or the patient's property.
19. The right to know how to contact an individual associated with the provider who is responsible for handling problems and to have the provider investigate and attempt to resolve the grievance or complaint.
20. The right to know the name and address of the state or county agency to contact for additional information or assistance.
21. The right to assert these rights personally, or have them asserted by the patient's family or guardian when the patient has been judged incompetent, without retaliation.

Client and/or Family Responsibilities

1. To provide complete and accurate information concerning your present health, medication, allergies, etc., when appropriate to your care services.
2. To inform a staff member of your health history, including past hospitalization, illnesses and injuries.
3. To involve yourself, as needed and as able, in developing, carrying out, and modifying your home care service plan, such as properly cleaning and storing your equipment and supplies.
4. To review the company's safety materials and actively participate in maintaining a safe environment in your home.
5. To request additional assistance or information on any phase of your health care plan you do not fully understand.
6. To notify your attending physician when you feel ill, or encounter any unusual physical or mental stress or sensations.
7. To notify Allina Home & Community Services when you will not be home at the time of a scheduled delivery or service visit.
8. To notify Allina Home & Community Services prior to changing your place of residence or your telephone number.
9. To notify Allina Home & Community Services when encountering any problem with equipment or service.
10. To notify Allina Home & Community Services if you are to be hospitalized or if your physician modifies or ceases your prescription(s).
11. To make a conscious effort to properly care for equipment supplied and to comply with all other aspects of the care plan developed for you.

These rights are established for the benefit of persons receiving home care services.

Office of Health Facility Complaints

As your medical equipment provider, we strive to provide quality services. If you need assistance, have questions, comments or complaints, please contact a customer service representative at Allina Home & Community Services at **651-628-4800** or **1-800-737-4473**.

If you have a complaint about the agency or person providing you home care services, you may call, write or visit the Office of Health Facility Complaints, Minnesota Department of Health. You may also contact the Ombudsman for Older Minnesotans.

Information about how to contact the Office of the Ombudsman for Older Minnesotans shall be included in notices of change in client fees and in notices where home care providers initiate transfer or discontinuation of services.

Minnesota Department of Health Office of Health Facility Complaints

85 E. Seventh Place, Suite 300
P.O. Box 64970
St. Paul, MN 55164-0970
651-215-8713 or 1-800-369-7994

Office of Ombudsman for Older Minnesotans

121 E. Seventh Place, Suite 410
St. Paul, MN 55101
651-296-0382 or 1-800-657-3591

Your privacy rights

We care about your privacy

As we care for your health, we learn about you. To protect your privacy, Allina follows certain rules about handling your health information. These rules and your health information rights are summarized below. For more detail, see the Allina Notice of Privacy Practices (Notice) on the following pages.

Your health information rights

- In general, you may see your health information upon request.
- You may request restrictions on who can see your health information.
- You may request corrections to your health information.
- You may request a list of certain disclosures we have made of your health information.
- You may ask questions about our privacy practices. If you disagree with any decision we make about your rights, you may contact us directly or contact the federal government, as provided in the attached Notice.
- We must get your written permission to share health information for purposes other than those listed below. If you give us permission, you may withdraw it at any time.

How we use and disclose your health information

- We use your information to care for you, inform you of helpful services, and comply with laws and government requirements.
- We may share this information with people involved in your care.
- We may also share limited information for fund-raising and to conduct research to better serve you.
- We may disclose information to law enforcement and certain government offices if there is a threat to public health or safety.

You may call or write us at any time with questions about your privacy rights. Fulfilling some requests may result in a cost to you. We will let you know in advance which of these requests will be charged and the approximate amount of the charges.

Allina Notice of Privacy Practices

This notice describes how health information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Our health information responsibilities

- We have a duty to protect the privacy of your health information and to give you this notice.
- We have a duty to abide by our current Notice of Privacy Practices.

“Health information” means information about your past or present health status, condition, diagnosis, treatment, prognosis, or payment for health care. (There are some exceptions.)

Who will follow this notice

This notice describes our facility’s practices and that of:

- All departments and units of the facility.
- All residents, medical students and other trainees affiliated with Allina Hospitals & Clinics.
- All volunteers who may assist you while you are in the facility.
- All employees, staff and other facility workers.

Your health information rights

Restrictions on use or disclosure. This notice describes some restrictions on how we can use and disclose your health information. You may ask us for additional restrictions on how we use or to whom we disclose the information. You need to make such a request in writing. We are not required to agree to your request. If we do agree, we will follow the restriction except:

- In an emergency where the information is needed for your treatment.
- If you give us written permission to use or disclose your information.
- If you decide or we decide to end the restriction.
- As otherwise required by law.

If you restrict us from providing information to your insurer, you also need to explain how you will pay for your treatments

Alternative communication. Normally, we will communicate with you at the address and phone number you give us. You may ask us to communicate with you in other ways or at another location. We will agree to your request if it is reasonable.

Patient access. You may request to look at or get copies of your health information. You need to make your request in writing. If you ask for copies in a format other than paper copies, we will give you that other format if practical. If you ask for copies, we may charge photocopying fees and costs of retrieval, the cost of making copies of X-rays or other images, and postage if the copies are mailed. If you ask for another format we can provide, we will charge a reasonable fee based on our costs. If your request is denied, we will send the denial in writing. This will include the reason and describe any rights you may have to a review of the denial.

Amendment. You may ask us to change certain health information. You need to make such a request in writing. You must explain why the information should be changed. If we accept your change, we will try to inform prior recipients (including people you list in writing) of the change. We will include the changes in future releases of your health information. If your request is denied, we will send the denial in writing. This denial will include the reason and describe any steps you may take in response.

Disclosure list. You may receive a list of disclosures of your health information – with some exceptions – made by us or our business associates. The list does not include:

- Disclosures made for treatment, payment or health care operations (this term is defined in the next section).
- Disclosures made before April 14, 2003.
- Other disclosures as allowed by law.

You need to make your request in writing. If you ask for a list more than once in a 12-month period, we may charge you a fee for each extra list. You may withdraw or change your request to reduce or eliminate the charge.

Paper copy of notice. You may receive a paper copy of our current Notice of Privacy Practices.

How to exercise these rights. Please contact us at the appropriate site to use any of these rights or receive more information about any related fees.

Allina Notice of Privacy Practices, *continued ...*

Uses and disclosures of health information. To provide you the best quality care, we have certain needs to use and disclose health information. We safeguard your health information whenever it is used or disclosed. We make all uses and disclosures according to our privacy policies and the law. We may use and disclose your health information as follows:

Treatment, payment and health care operations.

We may use and disclose your health information for:

- Treatment (includes working with another provider).
- Payment (such as billing for services provided).
- Our health care operations. These are non-treatment and nonpayment activities that let us run our business or provide services. Examples of these disclosures you have authorized include quality assessment and improvement, reviewing the competence or qualifications of health professionals, and conducting training programs.

Medical emergency. We may use or disclose your health information to help you in a medical emergency.

Appointment reminders and treatment alternatives. We may send you appointment reminders, or tell you about treatments and health-related benefits or services that you may find helpful.

Patient information directory. We may disclose the following information to people who ask about you by name:

- Location in the facility.
- General condition.
- Religious affiliation (given only to clergy).

You may choose not to have us disclose some or all of this information. For example, if you do not want us to tell people your location, we will agree to your instructions. (In some cases, such as medical emergencies, we may not get your instructions until you can communicate with us.)

People involved in your care. When you allow us to, we may disclose limited health information to people involved in your care (for example, a family member or emergency contact) or to help plan your care. If you tell us you do not want this information given out, it will not be shared. If appropriate, we may allow another

person to pick up your prescriptions, medical supplies or X-rays.

Philanthropy. We may contact you or have our foundations contact you about fund-raising programs and events to sustain our mission. We will only use or disclose your basic demographic information (such as name and address) and the dates you were treated by us. You may receive letters or other publications asking you to consider making a tax-deductible contribution to Allina to support our foundations and their missions. We do not sell or rent patients' names or addresses to any organization outside of Allina.

Research. We may use or share your health information for research as allowed by law or if you have given permission.

Death. We may disclose certain health information about a deceased person to the next of kin. We may also disclose this information to a funeral director, coroner, medical examiner, law enforcement official or organ donation agency.

Health care workplace medical surveillance/injury/illness.

If your employer is a health care provider, we may share health information required by state or federal law:

- For workplace medical surveillance activities.
- About work-related illness or injury.

Law enforcement. We may disclose certain health information to law enforcement. This could be about a missing child, when there may have been a crime at the facility, or when there is a serious threat to the health or safety of another person or people.

Correctional facility. We may disclose the health information of an inmate or other person in custody to law enforcement or a correctional institution.

Abuse, neglect or threat. We may disclose health information to the proper authorities about possible abuse or neglect of a child or a vulnerable adult. If there is a serious threat to a person's health or safety, we may disclose information to the person who is threatened or to law enforcement.

Food and Drug Administration (FDA) regulation. We may disclose health information to entities regulated by the FDA to measure the quality, safety and effectiveness of their products.

Allina Notice of Privacy Practices, *continued ...*

Military authorities/national security. We may disclose health information to authorized people from the U.S. military, foreign military and U.S. national security or protective services.

Public health risks. We may disclose health information about you for public health purposes, such as:

- Reporting and controlling disease (such as cancer or tuberculosis), injury or disability.
- Reporting vital events such as births and deaths.
- Reporting adverse events or surveillance related to food, medications or problems with health products.
- Notifying persons of recalls, repairs or replacements of products they may be using.
- Notifying a person who may have been exposed to a disease or may be at risk for catching or spreading a disease or condition.

Health oversight activities. We may disclose health information to government, licensing, auditing and accrediting agencies for actions allowed or required by law.

Required by other laws. We may use or disclose health information as required by other laws. For example:

- We may disclose health information to the U.S. Department of Health and Human Services during an investigation.
- We may disclose health information under workers' compensation or similar laws.
- We may disclose health information:
 - To social services and other agencies or people allowed to receive information about certain injuries or health conditions for social service, health or law enforcement reasons.
 - About an unemancipated minor or a person who has a legal guardian or conservator regarding a pending abortion.
 - About an emancipated minor or a minor receiving confidential services to prevent a serious threat to the health of the minor.

Legal process. We may disclose health information in response to a state or federal court order, legal orders, subpoenas or other legal documents.

Health records under state law. Release of health records (such as medical charts or X-rays) by licensed Minnesota providers usually requires the signed permission of a patient or the patient's legal representative. Exceptions include: medical emergencies, visits to a related provider for treatment, or other releases required or allowed by law.

With your authorization

Your authorization. We may use or disclose health information only with your written permission, except as described above. If you give written permission, you may withdraw it at any time by notifying us in writing. A form to revoke your permission is available from the Allina facility where you received services, or from the contact listed on Page 21. Your permission will end when we receive the signed form or when we have acted on your request.

Questions and complaints

If you have questions about our privacy practices, please contact us at the appropriate office listed on page 21. If you think your privacy rights have been violated, or if you disagree with a decision about any of your rights, you may file a complaint with us at the appropriate Contact Office.

You also may send a written complaint to the U.S. Department of Health and Human Services – Office of Civil Rights (OCR). We will give you the address to file a complaint upon request. Please know you will not be penalized for filing a complaint.

Organizations covered by this notice

This Notice applies to the privacy practices of the Allina Hospitals & Clinics listed below, their related sites and health professionals who provide care to you at these sites. These businesses are part of an organized health care system. We may share health information within our system for treatment, payment or health care operations.

- Abbott Northwestern Hospital
- Allina Community Pharmacies
- Allina Home & Community Services
- Allina Medical Clinic

Showroom Locations

Saint Paul

1055 Westgate Drive Suite 140
651-628-4800 / 1-800-737-4473
Monday through Friday
8 a.m. to 5 p.m.

Buffalo

300 Catlin Street Suite 103
763-684-3840
Monday through Friday
8 a.m. to 5 p.m.

Cambridge

2560 South Main Street Suite 100
763-689-7737
Monday through Friday
8 a.m. to 5 p.m.

Hutchinson

1077 South Highway 15 (Plaza 15)
320-234-5110
Monday through Friday
8 a.m. to 5 p.m.

New Ulm

1601 South Broadway
507-217-5585
Monday through Friday
8 a.m. to 5 p.m.

Owatonna

2010 South Cedar Avenue
507-451-7469
Monday through Friday
8 a.m. to 5 p.m.

Hospital Locations

Coon Rapids

Mercy Hospital
4050 Coon Rapids Boulevard NW
Room 0126A
763-236-7147
Monday through Friday
8 a.m. to 5:00 p.m.

Fridley

Unity Hospital
550 Osborne Road NE, Room 3316
763-236-3225
Monday through Friday
8:30 a.m. to 5 p.m.

Minneapolis

Abbott Northwestern Hospital
800 East 28th Street, Room E1059
612-863-5967
Monday through Friday
8:30 a.m. to 5 p.m.

Saint Paul

United Hospital
280 Smith Avenue North Suite 120
(Doctor's Professional Building)
651-241-8469
Monday through Friday
9 a.m. to 5 p.m.